

## MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

STATE PUBLIC HEALTH LABORATORY

BREATH ALCOHOL PROGRAM

## DATAMASTER MAINTENANCE REPORT

REPORT#6

						RECEIVED	
Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).  Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.  Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.							
ĐAT	AMASTER SH	NAME OF AG			DATE OF INSPECTION		
	206		PH POLICE DEPARTMEN	NT	11/04/2013 TIME OF INSPECTION		
LOCATION OF INSTRUMENT (STREET AND CITY)				1708			
501	FARAON ST.	JOSEPH	1 0 11 ( d t b	-tiefestani er if eneretir	11700	limits (Write In observed values	
CHECKLIST: Place a mark in the box by each Item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.							
Ø				DATE AND TIME	DATE AND TIME (from printout) 11/04/2013 1708		
	СОМРИТЕ	R		DETECTOR			
	<b>⊠</b> PROGRAM			FILTERS			
	HEATERS	SAMPLE CHAMBE	R 48 oc	QUARTZSTA	NDARD		
	✓ FLOW DET	ECTOR		☐ CALIBRATION	·		
	Nump Higi	H SPEED		□ PRINTER			
図	INDICATOR LI	GHTS					
M	SIMULATOR S	OLUTION SUPPLI	ER REP CO MARKETING	GLOT#_	120 <u>0</u> 1 E	EXRDATE <u>04/02/2014</u>	
Ø	SIMULATOR T	EMP (34'C ± 0.2'C	9 34.0 00	SIMULATOR SN SD2	.278E	EXP. DATE 12/17/2013	
M	CALIBRATION	CHECK - (ONLY C	NE STANDARD IS TO BE	USED PER MAINTEN	IANCE REPORT)		
	CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)  Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 of less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)						
0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE							
TE	ST 1101		TEST 2101		TEST 3 ,102		
		I. TEST (PRINTOU	T ATTACHED)				
IND (DC	ONOT INCLUDE	MBER OF BREAT SELF-ADMINIST	H TESTS IN THE FOLLOV ERED TESTS)	VING RANGES SINCE	THE LAST MAINT	ENANCE REPORT:	
REI	FUSALS 0	(004)	(.0509)	(.1014) 0	(.1509)	(OVER .19) 1	
LIST	ANY NEW PARTS AND	DESCRIBE ANY ALTERATI	ON OR MODIFICATION THAT WAS MA	DE TO RESTORE THE INSTRUM	IENT TO OPERATE SATISFA	CTORILY AND WITHIN ESTABLISHED LIMITS	
(USE	OTHER SIDE IF NECES	SSARY).			•		
MS	PECTING OFFI	CER					
	ATURE /		I Week	l l	PRINT FULL NAME		
My for the					SCOTT GARY CHRIS McBANE		
TYPE II PERMIT NUMBERIEXPIRATION DATE					TELEPHONE NUMBER		
220179 08/03/2013 220199 08/13/2014				816-271-5359			
RETURN COMPLETED REPORT TO THE:  Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Offic 2875 James Blvd. Poplar Bluff, MO 63901							

LAB-116

#### CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc. LOT NUMBER: 12001

EXPIRATION DATE: April 2, 2014 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1205 gms/dl +/-.003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interferring substance.

This solution will produce a vapor alcohol value of .100 +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is April 3, 2012.

The expiration date for this lot number is April 2, 2014 at 11:59 p.m.

This document is a true representation of the original Certificate of

Analysis.

Cecil B. Garner, President RepCo Marketing, Inc.

Form RM 02

## **ACE THIS SIDE DOWN - THIS EDGE IN FIRST**

## **BAC DataMaster**

**Evidence Ticket** 

STATE OF MISSOURI ST. JOSEPH POLICE DEPARTMENT '

BAC DATAMASTER SERIAL NUMBER 201206 11/04/13 17:08

--- DIAGNOSTIC CHECK ---

COMPUTER:

OKAY

PROGRAM (04-07-2009):

OKAY

HEATERS

SAMPLE CHAMBER:

48c

:LOW DETECTOR:

OKAY

MUMP

HIGH SPEED:

OKAY

DETECTOR:

OKAY

FILTERS:

OKAY

QUARTZ STANDARD:

OKAY

CALIBRATION:

OKAY

PRINTER TEST

!"#\$%%'<>\*+,-".\0153456789; {<=>\?@ABCDEFG IIJKLMNOPORSTUVWXYZ[\]^ 'abcdefghijklmno orstuvwxyz(1)→~

OR SIGNATURE

REORDER ALL SUPPLIES FROM N.P.A.S. P.O. BOX 1435, MANSFIELD, OH 44901

### FACE THIS SIDE DOWN - THIS EDGE IN FIRST

### **BAC DataMaster**

**Evidence Ticket** 

STATE OF MISSOURI ST. JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201206 11/04/13

ARREST TIME: 17:00 SUBJECT NAME: Н DOB: 09/09/09 SEX: M STATE/D.L.: MO/08 ARRESTING OFFICER: HG OFFICER I.D.: 99 TESTING OFFICER: GARY/SCOTT OFFICER I.D.: 1013 PERMIT NUMBER: 220179 EXPIRATION DATE: 08/03/14 MISCELLANEOUS DATA: RFI TEST

--- BREATH AMALYSIS ----

BLANK TEST INTERNAL STANDARD .000

17:20

17:21 VERIFIED

RADIO INTERFERENCE

**OPERATOR SIGNATURE** 

Card Stock No.

RECORDER ALL SUPPLIES FROM N.P.A.S. P.O. BOX 1435, MANSFIELD, OH 44901

### FACE THIS SIDE DOWN - THIS EDGE IN FIRST

## **BAC DataMaster**

**Evidence Ticket** 

STATE OF MISSOURI ST.JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201206 11/04/13

TESTING OFFICER:
GARY/SCOTT
OFFICER I.D.: 1013
PERMIT NUMBER: 280179
EXPIRATION DATE: 08/03/14
MISCELLANEOUS DATA:

#### --- SUPERVISOR MODE ----

BLANK TEST	. 000	17:15
INTERNAL STANDARD	<b>VERIFIED</b>	17:15
EXTERNAL STANDARD	.101	17:15
BLANK TEST	.000	17:16
EXTERNAL STANDARD	.101	17:16
BLANK TEST	.000	17:17
EXTERNAL STANDARD	.102	17:17
BLANK TEST	.000	17:18

⊣N = 3 | SIM. = .1 | AVG. = .1013

OPERATOR SIGNATURE

Card Steck No. 60021

REORDER ALL SUPPLIES FROM N.P.A.S. P.O. BOX 1435, MANSFIELD, OH 44901

# State of Missouri DEPARTMENT OF HEALTH



# PERMIT TYPE II



#### **SCOTT GARY**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

### DATAMASTER; ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

08/03/2012	want
Date	Director of State Public Health Laboratory
Expires 08/03/2014	Margart T. Dorwelly
NO 500 0771 77-981	Director, Department of Health Lab. 4 (R7-88)

# State of Missouri DEPARTMENT OF HEALTH



## PERMIT TYPE II



## CHRISTOPHER MCBANE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

## DATAMASTER; ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

air, issued dilder the provisions of sections			
08/13/2012	We note		
Date	Director of State Public Health Laboratory		
Number 220199	Margart T. Cornelly		
Expires <u>08/13/2014</u>	Director, Department of Health		
MO 680-0771 (7-88)	Lab. 4 (Fi7-86		